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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/320,156	05/26/1999	MICHAEL ROSENBLUM	D5425CIP2	4227
7590 06/04/2008				
David L. Parker FULBRIGHT & JAWORSKI LLP 600 Congress Avenue Suite 2400 Austin, TX 78701		EXAMINER CANELLA, KAREN A		
		ART UNIT 1643		PAPER NUMBER
		MAIL DATE 06/04/2008		DELIVERY MODE PAPER

**Please find below and/or attached an Office communication concerning this application or proceeding.**

The time period for reply, if any, is set in the attached communication.




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**Board of Patent Appeals and Interferences**

DAVID L PARKER  
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600 CONGRESS AVENUE  
SUITE 2400  
AUSTIN, TX 78701

Appeal No: 2008-2931  
Appellant: MICHAEL ROSENBLUM et al.  
Application No: 09/320,156  
Hearing Room: A  
Hearing Docket: A  
Hearing Date: Tuesday, July 08, 2008  
Hearing Time: 09:00 AM  
Location: Madison Building - East Wing  
600 Dulany Street, 9th Floor  
Alexandria, Virginia 22313-1450

**NOTICE OF HEARING  
CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS**

Your attention is directed to 37 CFR § 41.47. The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up. The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced. If there are any inquiries, please contact the Clerk of the Board at 571-272-9797.

CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED. This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

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**CHECK ONE:** ( ) HEARING ATTENDANCE CONFIRMED ( ) HEARING ATTENDANCE WAIVED

Signature of Attorney/Agent/Appellant \_\_\_\_\_

Date \_\_\_\_\_

Registration No. \_\_\_\_\_

Names of other visitors expected to accompany counsel: \_\_\_\_\_

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